UNITED STATES U.S. SECURITIES AND EXCHANGE COMMISSION

SEC Mali Processing Section

JAN _ A 7110A

Washington, DC

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

142	3552				
OMB AF	PPROVAL				
OMB Number 3235-0076					
Expires: April 30, 2008					
Estimated average burden					
hours per response:16.00					
SEC USE ONLY					
Prefix	Serial				
1					

DATE RECEIVED

Name of Offering (check if this is an amendment and name has changed, and indicate	te change.)
North American Granite Group Inc. De	December 2007 Issuance
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506	
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATI	ION DATA
1. Enter the information requested about the issuer	TABIN SELECTION SELECTION OF THE CONTRACT OF
Name of Issuer	cate change.)
North American Granite Group Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including A: 08020318
· · · · · · · · · · · · · · · · · · ·	307-851-2127
625 Howe Street, Suite 700, Vancouver, BC V6C 2T6	
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	PROCESSED
Brief Description of Business	V
·	JAN 1 4 2008
Proposed mineral resource exploration and development	<u> </u>
Type of Business Organization	_ IHUMSON
☐ corporation ☐ limited partnership, already formed	other (please specific ANCIAL
☐ business trust ☐ limited partnership, to be formed	
Month Year	· · · · · · · · · · · · · · · · · · ·
Actual or Estimated Date of Incorporation or Organization: 1 1 0 7	☐ ☐ Actual ☐ Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abl	obreviation for State:
CN for Canada; FN for other foreign jui	
GENERAL INSTRUCTIONS	
Endoual	
Federal: Who Must File: All issuers making on affering of acquirities in reliance on an augustion of	under Bernletien D. or Cention MC. 17 CED 220 501 -t 15 11C
Who Must File: All issuers making an offering of securities in reliance on an exemption to 77d(6).	under Regulation D or Section 4(6), 17 CFR 230.301 et seq. or 13 U.S
When To File: A notice must be filed no later than 15 days after the first sale of securiti	ties in the offering. A notice is deemed filed with the U.S. Securities a

Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only reported the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

	A. BASIC IDE	NTIFICATION DATA						
2. Enter the information requested for the following:								
• Each promoter of the issuer, if the issuer has been organized within the past five years;								
Each beneficial owner having the po	wer to vote or dispose, or d	irect the vote or disposition	n of, 10% or more	of a class of equity securities				
of the issuer;	-	·						
 Each executive officer and director of 	of corporate issuers and of c	corporate general and mana	iging partners of p	partnership issuers; and				
 Each general and managing partner 	of partnership issuers.							
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or								
	_	_	_	Managing Partner				
Full Name (Last name first, if individual)			**					
Norman W. Burmeister								
Business or Residence Address	(Number and Street, Cit	v. State, Zip Code)		· · · · · · · · · · · · · · · · · · ·				
19 Stoney Point Road, PO Box 785, Dubois,	·	,, a.m.e, 2. p acas,						
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or				
Check Box(cs) time reprise	Z Dimendial Owner		23 2	Managing Partner				
Full Name (Last name first, if individual)								
Ricardo Campoy								
Business or Residence Address	(Number and Street, Cit	v State 7in Code)						
14 Echo Lane, Larchmont, New York 10538		y, State, Zip Code)						
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or				
Check Box(es) that Appriy.	Building a Council	Executive Officer	M Director	Managing Partner				
Full Name (Last name first, if individual)								
Gregory A. Hahn								
Business or Residence Address	(Number and Street, Cit	- State Zie Code)						
8353 W. Iliff Avenue, Lakewood, Colorado	(Number and Street, Cit	y, State, Zip Code)						
	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or				
Check Box(es) that Apply: Promoter	M Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last same first if individual)	 							
Full Name (Last name first, if individual) Trans. America Industries Ltd.								
	OI 1 10 00	0: 1 7: 0 1)		, , <u>,</u>				
Business or Residence Address	(Number and Street, Cit	y, State, Zip Code)						
#300-905 West Pender Street, Vancouver, B								
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner				
Edition (Last specifical States)				Managing 1 artis.				
Full Name (Last name first, if individual)								
Dusiness - Desidence Address	Olivert and the state of the	- Co						
Business or Residence Address	(Numl-er and Street, Cit	ly, State, Zip Code)						
Charle Day () day 4 and 1								
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or				
P. 11.17 (7	····			Managing Partner				
Full Name (Last name first, if individual)								
								
Business or Residence Address	(Number and Street, Cit	ty, State, Zip Code)						
			_ _ _					
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or				
				Managing Partner				
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
								
(Use hla	nk sheet, or copy and use	additional conies of this	sheet as necessar	٠,١				

		_			В.	INFORMA	TION ABO	UT OFFER	ING				
			.1.4 4		. 4		4_4:	in this - 00-	n			Yes	No X
I.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							<u> </u>					
_	Answer also in Appendix, Column 2, if filing under ULOE.						NI a maini						
2.	* subject to the discretion of management						*************	No mini					
3.	Does	the offerin	g permit ioin	t ownership o	of a single u	nit?			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Yes X	No
4.													
•	or sir listed of the	nilar remui is an asso broker or	neration for s ciated person dealer. If m ormation for t	olicitation of or agent of a ore than five	purchasers broker or ((5) persons	in connection dealer registe to be listed	on with sales ered with the	s of securities SEC and/or	es in the offer with a state	ering. If a pe or states, lis	erson to be st the name		
Ful	- Name	(Last nam	e first, if indi	vidual)		_							
Not	Appli	cable	. .	_									
Bus	iness o	or Residenc	e Address		(Number	and Street,	City, State, 2	Cip Code)					
Nar	ne of A	ssociated B	roker or Deale	 भ					.				
Sta	es in W	hich Persor	n Listed Has S	olicited or Int	ends to Solic	cit Purchasers				·· <u>-</u>			<u>.</u>
	(Chec	k "All State	es" or check ir	dividual State	es)		•••••	***************************************		••••		☐ All	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
]	MT] RI]	[NE]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
Ful			e first, if indi		1 12.1		[11]	VA]	[WA]		[<u> </u>	[FR]
								_					
Bu	siness c	or Residenc	e Address		(Numt er	and Street,	City, State, 2	Zip Code)					
Na	ne of A	ssociated B	roker or Deale	 er		· <u>····</u>		<u>.</u>	 -				
Sta	tes in W	/hich Persor	n Listed Has S	Solicited or Int	ends to Soli	cit Purchasers					<u></u>	<u> </u>	
	(Chec	ck "All State	es" or check is	ndividual Stat	es)				,		***************************************		States
{	AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
(MT]	[NE]	[NV]	[NH]	[ונא]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
	RI] l Name	[SC]	[SD] ne first, if indi	[TN]	[_TX_]_	[UT]	_ [VT]	[VA]	[_WA]	[_WV]_	[WI]	[WY]	[PR]
ı u	1 1 varia	CLast nam		ividuat)									
Bu	siness o	or Residenc	e Address		(Number	r and Street,	City, State, 2	Zip Code)				- :-	
Na	me of A	ssociated B	roker or Deale	 er									-
Sta	tes in W	Vhich Person	n Listed Has S	Solicited or In	tends to So i	cit Purchaser				_ .			
			es" or check in									☐ All	States
ſ		[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
	IL]		[IA]	[KS]	(KY)	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	ן נא]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
ſ	RI I	1 SC 1	[SD 1	[TN]	r XX 1	r ur i	I VT 1	[VA 1	f WA1	r wv i	r wiii	r wy i	[PR 1

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	•	S
	Equity	\$ 150,000	\$ 150,000
	☐ Common ☐ Preferred	<u> </u>	150,000
	Convertible Securities (including warrants)	\$	s
	Partnership Interests	s	s
	Other (Specify)	\$ \$	•
	Total		\$ \$150,000
		\$ <u>150,000</u>	\$ <u>150,000</u>
2.	Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offering under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	3	\$ <u>150,000</u>
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of the securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		S
	Regulation A	 	\$
	Rule 504	····	\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		·
	Transfer Agent's Fees		s
	Printing and Engraving Costs		s
	Legal Fees	_	\$ 400
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	_	s
	Other Expenses (identify) Filing Fees		\$1,025
	Total		\$

	C. OFFERING I	RICE, NUMBER OF INVESTORS,	EXPENSES AND	USE OF PROCE	EDS	
	Question I and total expenses furnished i "adjusted gross proceeds to the issuer."		is difference is the			\$ <u>148,575</u>
5,	Indicate below the amount of the adjuster for each of the purposes shown. If the a and check the box to the left of the est adjusted gross proceeds to the issuer set for	mount for any purpose is not known, is imate. The total of the payments list	furnish an estimate ed must equal the			
				Payments to Offic Directors, & Affiliates	ers,	Payments to Others
	Salaries and fees			\$		\$
	Purchase of real estate			\$		\$
	Purchase, rental or leasing and installation	of machinery and equipment		\$		\$
	Construction or leasing of plant buildings	and facilities		\$		\$
	Acquisition of other businesses (including offering that may be used in exchange for	the assets or securities of another issue			_	
	pursuant to a merger)			\$		\$
	Repayment of indebtedness			\$		\$
	Working capital	,		\$		\$
	Other (specify): <u>Due diligence activities</u>			\$	Ø	\$ <u>148,575</u>
	Column Totals		_	\$	⊠	\$ <u>148,575</u>
	Total Payments Listed (column totals add	D. FEDERAL SIGNA		₩	\$ <u>148,</u>	
an i	issuer has duly caused this notice to be signed indertaking by the issuer to furnish to the U.S. non-accredited investor pursuant to paragraph	by the undersigned duly authorized person Securities and Exchange Commission, up	n. If this notice is fi	led under Rule 505, its staff, the inform	the followin ation furnish	g signature constitued by the issuer to
İssu	er (Print or Type)	Signature		Date		
	rth American Granite Group Inc.	ZUCOM	boy	January 4,	2008	
Nar	ne of Signer (Print or Type)	Title of Signer (Print or Type)				

		E. STATE SIGNATURE	<u> </u>	· · · · · · · · · · · · · · · · · · ·				
1.	Is any party described in 17 CFR 230.262 of such rule?	presently subject to any of the disqualification	on provisions	Yes NoX				
		See Appendix, Column 5, for state	response.					
2.	The undersigned issuer hereby undertakes 239.500) at such times as required by state	to furnish to any state administrator of any s law.	state in which this notice is filed, a no	otice on Form D (17 CFR				
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.							
4.		issuer is familiar with the conditions that mo his notice is filed and understands that the is n satisfied.						
	e issuer has read this notification and knows horized person.	the contents to be true and has duly caused t	his notice to be signed on its behalf l	by the undersigned duly				
Iss	uer (Print or Type)	Sign	Date					
No	orth American Granite Group Inc.	EMOMP	January <u>4</u> , 200	8				
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)						
Ric	cardo Campoy	Director						

END

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.